KOLAR Document ID: 1835258

Confidentiality Requested:

Yes No

### Kansas Corporation Commission Oil & Gas Conservation Division

Form ACO-1
January 2018
Form must be Typed
Form must be Signed
All blanks must be Filled

## WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License #	API No.:				
Name:	Spot Description:				
Address 1:	SecTwpS. R				
Address 2:	Feet from North / South Line of Section				
City: State: Zip:+	Feet from _ East / _ West Line of Section				
Contact Person:	Footages Calculated from Nearest Outside Section Corner:				
Phone: ()	□NE □NW □SE □SW				
CONTRACTOR: License #	GPS Location: Lat:, Long:				
Name:	(e.g. xx.xxxxx) (e.gxxx.xxxxx)				
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84				
Purchaser:	County:				
Designate Type of Completion:	Lease Name: Well #:				
New Well Re-Entry Workover	Field Name:				
□ Oil □ WSW □ SWD	Producing Formation:				
Gas DH EOR	Elevation: Ground: Kelly Bushing:				
☐ OG ☐ GSW	Total Vertical Depth: Plug Back Total Depth:				
CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet				
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used? Yes No				
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet				
Operator:	If Alternate II completion, cement circulated from:				
Well Name:	feet depth to:w/sx cmt.				
Original Comp. Date: Original Total Depth:					
☐ Deepening ☐ Re-perf. ☐ Conv. to EOR ☐ Conv. to SWD	Drilling Fluid Management Plan				
☐ Plug Back ☐ Liner ☐ Conv. to GSW ☐ Conv. to Producer	(Data must be collected from the Reserve Pit)				
Committed at Provider	Chloride content: ppm Fluid volume: bbls				
Commingled Permit #:  Dual Completion Permit #:	Dewatering method used:				
SWD Permit #:	Location of fluid disposal if hauled offsite:				
EOR Permit #:	Location of fluid disposal if fladied offsite.				
GSW Permit #:	Operator Name:				
<u> </u>	Lease Name: License #:				
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R East West				
Recompletion Date Recompletion Date	County: Permit #:				

#### **AFFIDAVIT**

I am the affiant and I hereby certify that all requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

**Submitted Electronically** 

KCC Office Use ONLY						
Confidentiality Requested						
Date:						
Confidential Release Date:						
Wireline Log Received Drill Stem Tests Received						
Geologist Report / Mud Logs Received						
UIC Distribution						
ALT I II Approved by: Date:						

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#### Page Two

Operator Name:					Lease Nam	ne:			Well #:	
Sec Tw	pS	S. R	Eas	st West	County:					
	l, flowing an	d shut-in press	sures, wh	ether shut-in pre	ssure reached	static	level, hydrostat	ic pressures, bo		val tested, time tool erature, fluid recovery,
Final Radioactivi files must be sub							s must be emai	led to kcc-well-l	ogs@kcc.ks.gov	v. Digital electronic log
Drill Stem Tests (Attach Addit		1		Yes No		Lo	g Formation	n (Top), Depth a		Sample
Samples Sent to	Geological	Survey		Yes No		Name			Тор	Datum
Cores Taken Electric Log Run Geologist Report List All E. Logs F	t / Mud Logs	s		Yes No Yes No Yes No						
			Rep	CASING	RECORD [	New e, interr		on, etc.		
Purpose of St	tring	Size Hole Drilled		Size Casing let (In O.D.)	Weight Lbs. / Ft.		Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
				ADDITIONAL	CEMENTING /	SQUE	EZE RECORD			
Purpose: Perforate		Depth Top Bottom	Тур	pe of Cement	Type and Percent Additives					
Protect Ca										
Plug Off Z										
Did you perform     Does the volume     Was the hydraul	e of the total I	base fluid of the	hydraulic f	fracturing treatment		-	Yes s? Yes Yes	No (If No, s	kip questions 2 ar kip question 3) Il out Page Three	
Date of first Produ Injection:	iction/Injection	n or Resumed Pr	roduction/	Producing Meth	od:	Пе	ias Lift O	ther <i>(Explain)</i>		
Estimated Product Per 24 Hours		Oil	Bbls.		Mcf	Water			Gas-Oil Ratio	Gravity
DISPOSITION OF GAS: METHOD OF COMPLETION: PRODUCTION INTERVAL										
Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled  (If vented, Submit ACO-18.)						Bottom				
,	· ·					1				
Shots Per Foot	Perforation Top	on Perfor Bott		Bridge Plug Type	Bridge Plug Set At		Acid,		ementing Squeeze and of Material Used)	
TUBING RECORI	D: S	ize:	Set At	: -	Packer At:					

Form	ACO1 - Well Completion
Operator	RJ Energy, LLC
Well Name	JB GEORGE 9
Doc ID	1835258

### Casing

Purpose Of String	Size Hole Drilled	Size Casing Set			Type Of Cement		Type and Percent Additives
Surface	9.875	7	17	40	portland	5	
Production	5.625	2.875	6.5	907	portland	120	

# RJ Energy, LLC Drill Log - Cement Log

Lease: JB George Start: 12/26/2024 Surface: 7" 40' 5 Sacks

**Well#** 9 **Finish:** 12/27/2024

**API#** 15-207-30012 **Longstring:** 2.875 " 907 ' 120 Sacks

Span	Formation	Depth	Notes	Pumped 120 sacks
4	Top Soil	4		and circulated to the top
17	Clay & Gravel	21		using company tools.
44	Shale	65		
64	Lime	129		
60	Shale	189		
97	Lime	286		
46	Shale	332		
141	Lime	473		
176	Shale	649		
27	Lime	676		
64	Shale	740		
30	Lime	770		
14	Shale	784		
10	Lime	794		
8	Shale	802		
14	Lime	816		
5	Shale	821		
5	Lime	826		
39	Shale	865		
9	<b>Broken Sand</b>	874	Good Show	
56	Shale	930	TD	